THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): Only one hospital *viz* Escorts hospital and Research Centre, Faridabad, is a recognised private hospital for general prupose treatment and diagnostic procedures for CGHS beneficiaries as no other hospital at Gurgaon and Faridabad had applied for recognition under CGHS in 1994. The CGHS beneficiaries of Gurgaon and Faridabad can however, avail of medical facilities from 24 private hospitals and diagnostic centres recognised under CGHS, Delhi.

Medical care for rural areas

5082. SHRI NARENDRA MOHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that health care system is not functioning as envisaged and most of the dispensaries, especially in rural areas remain non-functional;

(b) if so, whether Government have issued any guidelines or instructions to State Governments with a view to ensure that people in semi-urban and rural areas get medical care and attention from Government dispensaries; and

(c) whether help of the Medical Council of India or similar organizations has been sought in this regard?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI N.T. SHANMUGAM): (a) The health care in the rural areas is provide through three-tier system of Sub-Centre, Primary Health Centre and Community Health Centre. The total number of Sub-Centres. PHCs and CHCs functioning in the country are 137006, 2319 and 2913 respectively. However, the Government is well aware of the fact that there is a shortfall in infrastructure and manpower in the primary health care system.

(b) Yes, Sir. The State Governments have been given targets to set-up centres during Ninth Five-Year Plan. The State Governments are also directed to fill-up the vacancies of doctors and para-medical personnel from time to time. Under Reproductive and Child Health Programme, to strengthen the Primary Health Care the Central Government is assisting the State Governments by authorising contractual appointments of essential staff, supply of medical kits, provision of training and civil works. Some of the state have also made the rural service obligatory for new graduates for at least two-three years.

(c) In order to reflect, the concepts and implementation strategies of the Reproductive and Child Health Programme as well as that of National Production Policy 2000, it is envisaged to modify the under post-graduate medical, nursing and para-medical professional course syllabi and curricula in consultation with the Medical Council of India the Councils of ISMH and Indian Nursing Council.

Health care for citizens

5083. SHRI EDUARDO FALEIRO: Will the Minister of HELATH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that health care for the elderly as well as other age groups belonging to weaker sections throughout the country is insufficient; and

(b) if so, the steps contemplated by Government in this regard?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI NT. SHANMUGAM): (a) and (b) The Central Govt, along with State Govts, are making efforts for creating infrastructure facilities for providing health care to the different age groups and weaker sections. Due to resource constrains, there is some shortage of health infrastructural facilities as per norms in rural areas. Therefore, funds are being availed of from external agencies wherever feasible.

To enable the States to fill critical gaps in providing health services to the people, external assistance has been availed of by the Central Government for National Health Programmes for Malaria. TB., Leprosy, Blindness. AIDS, Reproductive and Child Health Programme. Besides for upgrading the rural hospitals in selected States. World Bank assistance has been availed of which would further improve delivery of health services. Also, the Ministry of Social Justice and Empowerment provides grant-in-aid to NGOs for running Mobile Medicare Units for old people.

Vacancies in Safdarjung Hospital

5084. SHRI K. RAHMAN KHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the category-wise vacancies existng presently in the prestigious Safdarjung Hospital of Delhi and since when; and

(b) the steps taken to fill up these vacancies to heip the patients coming in large numbers for treatment?